

## Green Energy Program Grant Application

Division of Energy and Climate 1203 College Park Drive, Suite 101, Dover, DE 19904 Phone: (302) 735 - 3480 & Fax (302) 739 - 1840

<b>Geothermal</b>
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Residential	
Commercial	
Non-Profit	

Applicant Information				
Name / Company:				
Email:				
Daytime Phone:	Evening Phone:			
Installation Address:				
City:	State:	Zip code:		
Mailing Address:				
City:	State:	Zip code:		
Electric Utility:	Last 12 Months kV	Last 12 Months kWh Usage:		
Rebate Recipient (If other than applicant)				
Name / Company:				
Email:	Daytime Phone:	Daytime Phone:		
Mailing Address:				
City:	State:	Zip code:		
Please transfer this grant payment to the above	named company or individual	. I understand that I will not receive the grant		
payment for this project:  Applicant Signature:				
Contractor:				
Name / Company:	DE Business License #			
Email:	Daytime Phone:			
Mailing Address:				
City:	State:	Zip code:		
<b>Licensed Installation Professional (Master)</b>	HVAC Contractor)			
Name of Master HVAC Contractor:	DE E	DE Business License #		
Email:	Profe	Professional License #		
Daytime Phone:	Profe	Professional License Issuing State:		
Mailing Address:				
City:	State:	Zip code:		



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## Geothermal

Applicant Name:			
System Characteristics			
Installation type (Check one):	( ) New Construction	( ) Existing Construction	( ) Replacement
System Type (Check one):	( ) Open Loop	( ) Closed Loop / Vertical	
	( ) Closed Loop / Horizontal	( ) Direct Exchange	
Unit Manufacturer:		Unit Model #	
Unit Serial Number:			
List EER and COP for all Units:	EER	COP	
Capacity (total tons):			
System Cost			
Material Cost:	Permits:		
Labor Cost:	Other Fees:	Total Cost:	
Rebate Calculation: Grants may no	t exceed the grant cap		
Residential, Non-Residential, R	eplacement	Non-Pro	fit
(1) First 2 Tons (T) x \$800/(T)		(1) First 2 Tons (T) x \$1000/(T)	
(2) Remaining Tons x \$700/(T)		(2) Remaining Tons x \$800/(T)	
Total Request: (1) + (2)		Total Request: (1) + (2)	
Declaration			
I understand and certify that:  1) the information provided on this for	rm is accurate		
2) the above described system is inten		oplicants electricity needs at the ins	tallation site
3) the site of installation is located in		-	
4) the State of Delaware and its agents	s provide no warranty for this sy	vstem	
5) all warranties are provided by the in	nstalling contractor and include	minimum coverage of at least 5 year	ars parts and labor
6) the applicant has received a copy of	f this completed form	-	•
7) completed grants may be queued for	or payment pending availability	of funds and the wait for payment of	could be lengthy
Signatures			
Purcha	Purchaser Contractor		etor
Printed Name:		Printed Name:	
Signature :	Signature:		